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## APPLICANTS

Donald C. Hutchins, Longmeadow, MA; JMH

\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY MA	SHEETS DRAWING 4	TOTAL CLAIMS 23	INDEPENDENT CLAIMS 1
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## ADDRESS

26161  
 FISH & RICHARDSON PC  
 225 FRANKLIN ST  
 BOSTON , MA  
 02110

## TITLE

Lighting

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